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ABSTRACT

This document describes the 10 Exemplary Programs in alcohol and other drug abuse prevention selected in 1990. The programs included provide models of state-of-the-art alcohol and drug abuse prevention programs that may be replicated or adapted by others. Illustrating a wide variety of approaches that are effective in diverse communities, the programs reflect practical plans of action that are yielding encouraging results in the ongoing effort to eradicate the abuse of alcohol and other drugs. The Exemplary Programs are arranged alphabetically by state and are followed by brief descriptions of the seven programs in the honorable mention category. For each Exemplary Program, a brief statement about the program is given, followed by the names, addresses, and telephone numbers for the agency, the names of the contact persons, the state director, and the state prevention coordinator. The agency clientele is described and major services are listed. Included are the following programs: (1) Asian Youth Substance Abuse Project (San Francisco, California); (2) Preschool Stress Relief Project (Atlanta, Georgia); (3) Aroostook Mental Health Center Prevention Project (Caribou, Maine); (4) Community Organizing For Prevention (Lincoln, Nebraska); (5) Primary Prevention in Public Housing (New York, New York); (6) Absentee Prevention Program (Monaca, Pennsylvania); (7) Alternatives For Teens (Middlebury, Vermont); (8) Early Drug Abuse Program (Montpelier, Vermont); (9) Leadership Project (Westminster, Vermont); and (10) Families And Schools Together (Madison, Wisconsin). (NB)

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Communities Creating Change

Exemplary Alcohol and Other Drug Prevention Programs 1990

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Alcohol, Drug Abuse, and Mental Health Administration
Office for Substance Abuse Prevention
in cooperation with the
National Association of State Alcohol and Drug Abuse Directors and the National Prevention Network

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1990 Exemplary Programs for Preventing Alcohol and Other Drug Abuse

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Introduction

> There can be no "one-size fits all" prevention program or strategy. Prevention activities must be consistent with the priorities, values, world view, and ways of communicating that exist in each community.
>
> —*Citizen's Alcohol and Other Drug Prevention Directory*

The origins of alcohol and other drug abuse are complex and deeply embedded in our culture, our social structure, and our economic systems. Cultural norms and values, national policies, State and local laws, law enforcement practices, school policies, the behavior of parents, and the beliefs and attitudes of individuals may all contribute to alcohol and other drug problems. Effective prevention approaches address these complex factors.

Research confirms that alcohol and other drug abuse prevention strategies help individuals to develop and maintain healthy lifestyles, behaviors, and attitudes. These same strategies can help individuals improve their self-perceptions by teaching them that they are competent, that they are an important part of something larger than themselves, and that their actions affect the direction and events of their lives. Prevention strategies can assist individuals in living personally satisfying and enriching lives as they constructively confront complex, stressful life situations.

Because the creation and maintenance of a drug-free society are crucial to the health and well-being of all Americans, the Office for Substance Abuse Prevention (OSAP), the National Association of State Alcohol and Drug Abuse Directors (NASADAD), and its affiliate—the National Prevention Network (NPN)—present the 1990 Exemplary Programs. They are showcased here to provide the public with models that can be replicated or adapted in communities across America.

The goals of the Exemplary Program Study are twofold. First, the study provides models of state-of-the-art alcohol and other drug abuse prevention programs that may be replicated or adapted by others. Second, national attention is focused on exemplary alcohol and other drug abuse prevention efforts. All alcohol and other drug abuse prevention programs are nominated for recognition by the State alcohol and drug agency or through selected national organizations.

The 1990 Exemplary Programs illustrate a wide variety of approaches that are effective in diverse communities because no single approach will be effective in every area. They demonstrate that prevention can be best achieved through multiple strategies that address the unique characteristics, cultural diversity, and structure of each community in the Nation. These programs offer strategies designed for prevention practitioners, individuals interested in becoming involved in the field, and public policymakers at the community, State, and national levels.

Communities have the unique opportunity to involve individuals as agents of social change, thus forming a strong base of support for new standards that not only prevent alcohol and other drug abuse, but also build a climate of health and positive growth. Through broad participation and motivation, communities have the power to collectively create a drug-free society. The 1990 Exemplary Programs reflect practical plans of action that are yielding encouraging results in the ongoing effort to eradicate the abuse of alcohol and other drugs.

Recognizing excellence in prevention programming is traced back to annual meetings of State prevention coordinators during the late seventies and early eighties. Throughout the period of 1983-85, a committee of the NPN drafted a procedure for identifying and selecting outstanding

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programs. In 1986, the process was further refined by the addition of criteria by which to rate the programs. The procedure included a call for nominations that went out to local programs through the States and through the national organizations that were represented on the Committee. In 1987, the first Exemplary Programs were recognized at a special ceremony in Washington, DC. The second set of Exemplary Programs was acknowledged in 1989 at the Second Annual Prevention Research Conference.

During the winter of 1989-90, the national nomination process was used to identify effective alcohol and other drug abuse prevention programs. The program nominations were reviewed and rated by 33 professionals who were selected for their expertise in the field of prevention and other related areas of activity. Reviewers included representatives of alcohol and other drug abuse agencies, national organizations, NPN associate members, and previous Exemplary Program winners.

Reviewers rated the applications by identifying major strengths and weaknesses, giving an overall summary of each program's characteristics, and rating the applications on a 10-point scale in the following categories: philosophy, background and need (program planning), goals and objectives, evaluation, marketing and promotion, target population(s), activities and strategies, community coordination, replicability, and program management. State agency personnel and national organizations submitting nominations reviewed the information contained in each application and certified its accuracy. The review committee then met in Washington, DC, to identify the 1990 Exemplary Programs and those that merited honorable mention.

The Exemplary Programs are arranged in alphabetical order by State and are followed by the honorable mention category.

Asian Youth Substance Abuse Project

This culturally specific, multilevel, and comprehensive alcohol and other drug abuse prevention consortium works with high-risk Asian youth and their families in San Francisco.

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Clientele

Asian youth (Chinese, Cambodian, Japanese, Korean, Vietnamese, and Filipino), aged 12 to 20, who are immigrant, refugee, or American-born. The target population lives in San Francisco, CA, where in 1980, Asians were the largest minority group. By 1990, it is estimated that they will be the largest group in the city, composing 44 percent of its population. San Francisco's Asian population is ethnically and culturally diverse with 32 identifiable ethnic groups.

Major Services

Currently in its third year of operation, the Asian Youth Substance Abuse Program (AYSAP) is now in its second year of providing services. These services include:

- Youth activities. Included are support groups and workshops addressing cultural conflicts, self-esteem, social competencies, and cultural enrichment. For example:
  - The Youth Empowerment Program incorporates a set of activities based on the need to provide acceptable alternatives for high-risk Asian youth who are already using alcohol and additional drugs and exhibiting other antisocial behavior. Included are expressive arts groups where participants can receive training in culturally based singing, dancing, drama, fashion modeling, poetry, and other activities.
  - The Life Skills Development Program includes life skills training and summer leadership internships. A third activity, youth-to-youth mentoring, is scheduled to be included soon.

- Parent activities. Large parent forums to build awareness, ongoing workshops aimed at strengthening parenting, and efforts to teach skills for coping with cultural transitions are included in these activities. For example:
  - Parent forums involve up to 100 interested family members to raise awareness of such teen issues as understanding their physical and psychological needs, providing guidance in their social life, helping them develop a positive cultural identity, and maintaining family harmony.
  - Parenting workshops are offered for participants who are recruited from the forums and enrolled in a series of five 2-hour sessions. Bilingual and bicultural health educators and counselors facilitate these group sessions.
- Community activities. An active community education approach through direct contact with groups, as well as through the ethnic media, has been highly successful, leading to activities in which other communities help cosponsor alcohol- and additional drug-free activities. For example:
  - The parish-based Filipino Family Movement is a series of family-focused educational and recreational activities aimed at strengthening Filipino family and cultural values.
- Institutional activities. Partnerships with traditional systems, such as schools and physical and mental health services, are developed to support and enhance the well-being of Asian youth and families.

The program's funding comes from the Office for Substance Abuse Prevention.

By the end of its second year, AYSAP had:

- Served 4,371 high-risk youth
- Served 1,423 family members
- Trained 2,581 providers (school counselors, teachers, social workers, and community leaders)

Because AYSAP has been in operation only a little over 2 years, the program has developed a 5-year plan that will serve as a resource for other communities having a multicultural urban population.

Preschool Stress Relief Project

This primary prevention demonstration project provides training, consultation, and educational resources in holistic stress management techniques for high-risk preschoolers, their parents, and teachers in an effort to reduce alcohol and other drug problems and increase healthy lifestyles.

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Clientele

All together, 1,055 Head Start Preschoolers in metropolitan Atlanta, GA, of whom 89 percent are Black, 8 percent White, 2 percent or less Asian, and less than 1 percent Hispanic and Native American. Of the high-risk children served, 100 percent were economically disadvantaged and Head Start-eligible, and 10 percent were physically disabled.

Major Services

The Preschool Stress Relief Project (PSSRP) is based on psychologist George Albee's definition of prevention: lowering the incidence of emotional disorder by reducing stress and by promoting conditions that increase confidence and coping skills. With this philosophy in mind, the PSSRP has provided the following services:

- Developed an effective alcohol and other drug abuse prevention program with significant data research in the area of stress reduction for preschoolers
- Developed a complete educational package, including a curriculum, posters, songs, puppets, stickers, and videos to help teachers implement the program (The six-lesson curriculum covers topics such as "I Am a Good Person," "Feelings and You," "Your Body Changes With Stress," "Good Ways to Get Anger Out," "Deep Breathing and Relaxation," and "Yoga Exercises.")

- Designed a training model for teachers and parents (Separate parent training sessions were also held at PTA meetings.)
- Developed two culturally relevant educational videos for adults and three puppet videos for preschoolers

In addition to the 1,055 preschoolers in the program, PSSRP provided services to 250 parents and 67 teachers; over 250,000 people have been informed about PSSRP and its effects during the first 2 years.

In an evaluation study of randomly selected children, it was found that the program was effective in (1) reducing such symptomatic behaviors as worrying, nail biting, shaking, fatigue, temper tantrums, yelling, and rocking motions; (2) increasing their ability to recognize various emotions; (3) increasing their awareness of how stress affects their lives; and (4) increasing parental participation by 20 percent.

The original program was the recipient of two awards from the Governor's Commission in the area of mental health and juvenile delinquency prevention.

PSSRP was originally sponsored by the National Council of Negro Women. It received funding from the Office for Substance Abuse Prevention until August 1989, when it changed sponsorship, and is now being housed by the Wholistic Stress Control Institute (WSCI). WSCI is a nonprofit organization whose purpose is to increase personal resources for coping with stress. It received State and local funds and contributions from private donations and foundations.

PSSRP's model has already been replicated in Head Start Centers in Seattle, WA, San Francisco, CA, and the Virgin Islands, and in elementary schools in Michigan. Training for the 10 Head Start regions in the United States is being planned. All educational materials developed and used in PSSRP are available.

Aroostook Mental Health Center Prevention Project

Through the active participation of public and private organizations, the Aroostook Mental Health Center (AMHC) provides a broad, community-based program for youth aged 5 to 19, for parents, and for community leaders in two Maine communities.

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Clientele

Youth aged 5 to 19; parents; and community leaders, members of concerned community groups, and staffs of related agencies. The program was not designed to reach at-risk youth specifically, but includes and promotes the participation of that population in all its activities.

The project operates pilot programs in two communities in Aroostook County. Caribou, a community of 9,000, is a large rural area located near a major U.S. Air Force base. It is business-oriented and has a mixed population that includes a large percentage of Swedish descendants, as well as a small percentage of Black and Native American residents. Madawaska, a smaller community of 6,000, is a mill town influenced by French culture and located on the Canadian border. Madawaska is also a rural area.

Major Services

The purpose of the AMHC Prevention Project is to create and help maintain a community-based prevention program in as many major Aroostook County communities as is feasible, and to urge the participating communities to make these programs self-sustaining.

The major goal of the program is to develop a community-based alcohol and other drug use prevention planning and service model that encourages "no use" of alcohol and other drugs by youth. The prevention team believes that the chances of achieving no use are greater when several

resources are mobilized. Participation involves informal grassroots networks, as well as existing formal groups, task forces, agencies, and interested individuals.

The continuum of services includes prevention, education, outreach, intervention, and treatment. The AMHC Prevention Project provides:

- Prevention training and consultation to community resource representatives and parents to assist trainees with the inclusion of prevention activities in their communities
- Training for parents, so that they can help their children develop coping skills
- Cosponsoring, with community agencies, prevention activities that affect various risk factors:
  - Just Say No Clubs
  - Up With Teens
  - Aroostook Teen Leadership Camp
  - Buddy System
  - Phone Friend
- Healthy lifestyles training for junior high school students
- Peer education programs for high school students
- A replication guide, published and distributed nationally by the Maine Office of Alcoholism and Drug Abuse Prevention in 1987

Project successes are reflected in the strong relationships that have developed between community resource people, the high participation in planned activities, the adoption of program models by sponsoring entities, and an increase in requests for services outside the target area.

Community Organizing For Prevention

This comprehensive, community-based prevention program seeks to shift rural Nebraska alcohol use norms by organizing training retreats and seminars for community leaders, youth, parents, and teachers.

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Clientele:

Community leaders, school personnel, parents, and youth from mostly rural areas and small towns in Nebraska. The program makes a special effort to recruit community and youth teams from towns or school districts that already have trained school groups for prevention efforts. Community Organizing for Prevention's training content includes special considerations for children from alcoholic families and other high-risk youth.

Major Services

Community Organizing for Prevention was designed as a comprehensive, community-based operation to provide prevention services to a large rural area with few local resources. This program offers the following major services:

- Community organizing retreats (Teams of community leaders are recruited and brought together with other community teams for 4-day training retreats to prepare them to return to their communities and implement prevention efforts. Teams are encouraged to initiate the three programs noted below, as well as other available prevention programs.)

- "Proud To Be Drug Free" Summer Youth Retreats (Teams of young people and their adult sponsors attend 4-day training retreats to prepare them to return to their schools and

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communities to offer alcohol- and other drug-free support groups, provide alternative activities, supply community services, and work with younger children.)

- Parent education (Teams of parent educators receive 3-day Training of Trainers seminars to prepare them to deliver the parent course, "SETTING THE LIMITS...Keeping Your Kids Alcohol and Drug Free," to other parents in the community. The course helps them to set rules and expectations of no use of alcohol and other drugs for their children. It emphasizes the importance of parental role modeling by advocating that adults follow the Adult Alcohol Use Standards if they choose to drink.)

- School curriculum (Teachers receive 2-day training sessions enabling them to effectively deliver the junior high school curriculum, "Decisions About Alcohol and Other Drugs—Revised," in their schools. This curriculum is a companion to the "Setting the Limits" parent course.)

Followup community organizing and youth retreats services include:

- Community teams (Community teams attending a training retreat are automatically eligible for intense followup and technical assistance, which includes regional networking, reunion retreats, onsite technical assistance, refresher training, and advanced training.)

- Youth teams (After attending the youth retreat, youth teams graduate to the statewide Nebraska Network of Drug Free Youth organization. This network provides youth groups with various followup and leadership activities.)

Using the initial Community Organizing for Prevention retreats as the foundation, the program attempts to implement the above-listed components in selected communities. All these efforts are designed to establish a community standard that ultimately leads to no use of tobacco or illegal drugs by anyone, no use of alcohol by minors, and either abstinence or low-risk use of alcohol by adults.

Community Organizing for Prevention coordinates closely with available prevention resources within Nebraska, including local councils on alcoholism, the Nebraska Department of Education, Parents in Action in Nebraska, and other statewide agencies.

Since the program's inception 3 years ago, the following categories of people have been trained: 72 community teams, 55 youth teams, 85 parent educators, and over 100 teachers.

Primary Prevention In Public Housing

Boys and Girls Clubs demonstration sites have been established in five public housing projects, each project offering a comprehensive youth development program and a specific alcohol and other drug prevention program known as SMART Moves.

Agency

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Clientele

High-risk Boys and Girls Club members aged 5 to 18 and their parents or guardians who live in five public housing projects in Jacksonville, FL; Rodeo, CA; Binghamton, NY; Houston, TX; and Rockford, IL. The members are 15 percent white and 85 percent minority; many are latchkey children (either school dropouts or in danger of becoming so), children of alcohol and other drug abusers, or victims of other abuse or neglect. In addition, 77 percent of the families live below the poverty level, and 83 percent of households are headed by females.

Major Services

Multiple activities used to demonstrate the ability of the clubs to prevent alcohol and other drug use among youth in the public housing projects include:

- Daily youth programs to (1) develop leadership skills and civic responsibility; (2) develop healthy lifestyles through sports, physical fitness, health education, and health services; (3) develop skills in visual and performing arts; (4) develop skills in planning, setting goals,

education, and employment; (5) teach life skills, good use of leisure time, and ways to get along with others; and (6) develop an appreciation of the natural environment (These programs and activities take place in a drug-free environment with positive role models who work as program professionals in the clubs.)

- Implementation of the Boys Clubs of America's national prevention program, known as SMART Moves, which is intended to:
  - Build life skills that help youth make good decisions, cope with stress, and enhance communication
  - Increase the ability of youth to recognize and resist peer and other pressures (such as the media) that encourage the use of alcohol and other drugs
  - Transmit accurate information about alcohol and other drugs and adolescent sexuality
  - Increase community awareness of the importance of a consistent "no use" message

SMART Moves is made up of five components targeted for different audiences: Start SMART for 10- to 12-year-olds; Stay SMART for 13- to 15-year-olds; Keep SMART for parents and guardians; Be SMART, an in-service training program for Club staff and volunteers; and SMART Ideas for a community-wide audience. All components employ various methods to help youth resist alcohol and other drugs.

An independent evaluation conducted by Columbia University concludes, after 2 years of study, that Boys and Girls Clubs exert a positive, consistent, and palpable influence on the human and physical environment of public housing projects.

For children and adolescents who live in public housing and who have access to a Boys and Girls Club, that influence is manifest in youths' involvement in healthy and constructive educational, social, vocational, and recreational activities. Also relative to their counterparts who do not have access to a club, these youth are much less involved in unhealthy, deviant, and dangerous activities.

Data from the evaluation show that adult residents of housing projects are also beneficially affected by Boys and Girls Clubs. Compared with parents in housing projects that do not have club programs and facilities, adult family members in projects with Boys and Girls Clubs are more involved in youth-oriented activities, school programs, and tenant associations. For adults and youth alike, Boys and Girls Clubs are associated with an overall reduction in alcohol and other drug use, drug trafficking, and other drug-related criminal activity and offer hope for all residents and neighbors of the Nation's public housing projects.

The Primary Prevention Program in Public Housing has received funding or other support from the Office for Substance Abuse Prevention, local housing authorities, local United Ways, local police, business and industry, community prevention and treatment agencies, and family foundations.

The Boys Clubs of America is making progress toward bringing a consortium of funding sources to provide startup funds for 150 additional public housing sites. In addition, a manual and training program for setting up future clubs in public housing have been developed.

Absentee Prevention Program

This program is a school-based early intervention model designed to reduce the risk factors associated with chronic absenteeism and tardiness at the elementary and middle school level, as well as to address behavioral indicators of potential absenteeism.

Agency

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Clientele

Elementary and middle school students who are chronically absent or tardy from school. The students may exhibit the following indicators of potential absentee problems: lack of success in school (academic or social), frequent ridicule from classmates, antagonism toward school or schoolwork, anxiety about entering school or a classroom, marked change in behavior, change in physical appearance (e.g., unkempt, fatigue upon arrival at school), frequent illnesses occurring during the day, significant events (e.g., divorce, change in the father figure, death in the family, arrest of parent), and negative parental attitude toward school or school policy (e.g., history of sibling dropouts, complaints from the child that no one will wake him or her, failure to send excuses).

Major Services

The Community College of Beaver County (CCBC) Absentee Prevention Program (APP) is a three-phase process. Phase 1 identifies the chronic absentee. Phase 2 involves the assessment of the child's needs by the prevention specialist and a team of school personnel. Phase 3 consists of planning an appropriate course of action and intervention with the child, family, and school personnel. The program functions as a team approach, with the prevention specialist interacting directly with children, parents, teachers, and a core team of educators involved in planning the

program. The team provides early intervention services to children, their families, and teachers. Intervention strategies include:

- Working with parents by conducting home visits, making referrals to and networking with human service agencies, planning parenting sessions, providing moral support, and serving as a liaison between home and school
- Working with the student by monitoring daily attendance, providing one-to-one counseling, and providing small group sessions
- Working with the school by identifying staff members to act as in-school support persons, by designing student behavior modification plans with teachers, and by facilitating steady communication among all personnel working with the child

The APP manual is another major service of the program. It provides specific procedures for program implementation and documentation forms, and it discusses replication and evaluation procedures in detail. A 2-day training program and training materials are available as well.

Because the CCBC Absentee Prevention Program offers APP training, it is currently replicated in 12 Pennsylvania school districts, 4 New Jersey schools, and schools in 9 Michigan counties.

Data collected over a 3-year period at the pilot site not only showed statistically significant evidence of improved attendance, but justified an outreach program to identify and assist families in need of alcohol and other drug services or additional family services. These same data revealed that 60 percent of the students referred have a parent abusing alcohol or other drugs.

Community coordination is vital to the success of the program. The APP model includes an extensive community involvement component. Funding and support have been provided by such groups as the Pennsylvania Health Department, the County Commissioners, Children and Youth Services, the Catholic Diocese, the Child Health Association, a trust foundation, the Big Beaver Falls Area School District, the National Association for the Advancement of Colored People, the area Parent-Teacher Organizations, the Lions Club, other community organizations and concerned citizens.

APP requires interagency, as well as community, collaboration. Local businesses and organizations also donate attendance incentives for students. Churches and charitable organizations donate clothing and alarm clocks.

APP is a demonstration model for the Pennsylvania Department of Health, the Office of Drug and Alcohol Programs, the Michigan Department of Mental Health, and the New Jersey Department of Education (Drug and Alcohol Division).

Alternatives For Teens

Alternatives for Teens (AFT) is a long-term primary prevention program involving teenagers in educational support groups that meet to discuss issues important to them, to plan events that are enjoyable alternatives to alcohol and other drug abuse, and to practice life skills with a peer group.

Agency

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Clientele

Addison County, VT, teenagers aged 12 to 18 in grades 7 to 12. Teenagers can belong to AFT for as long as 6 years. Those who join AFT are often characterized as having feelings of loneliness, confusion, and a lack of a place to go.

Participants are identified by self-identification, school guidance counselors, teachers, administrators, parents, and friends. Teens are also recruited through school-related announcements and through articles and advertisements in local newspapers.

In any given year, approximately 1,500 people are involved in AFT events.

Major Services

AFT was created to provide teenagers with enjoyable, alternative events to alcohol- and other drug-related parties. The outstanding feature of the program is that the teens themselves decide what types of events they wish to hold. Once the decisions are made, the members conduct the actual planning and make the necessary arrangements.

An adult facilitator meets weekly with 11 groups of 8 to 14 members. Subjects for discussion are initiated and agreed upon by members. Group meetings are held once a week for 30 to 50 minutes during school hours, or up to 90 minutes during non-school hours. The program is most effective

during school hours because after-school transportation is not available to everyone in this rural community.

Services offered by the AST program are:

- Social events that are conceived, designed, and planned by teen members
- Weekly group meetings with an adult facilitator, during which teens discuss any issues or topics of importance to them.
- A resource guide, *Life Skills for Teens: The Group Leader's Guide to Alternatives for Teens* (This guide discusses the program in detail and provides instruction for coordinators/facilitators and others wishing to replicate the program.)

Community coordination with AFT is vital to its success. The following categories of groups offer assistance and support:

- Schools
- Parents
- Service agencies and organizations
- Businesses
- Media
- Mothers Against Drunk Drivers (MADD)
- Students Against Driving Drunk (SADD)

One example of an AFT event is the annual raft race. For the past 6 years, AFT has organized this race, in which students and their parents build and float the rafts. The event was covered by the State's largest newspapers, the school's industrial arts program offered a workshop on raft-building, and local businesses donated prizes for the winners.

A number of system-wide changes have occurred over the past 7 years during which AFT has been in existence. The State drinking age was raised from 18 to 21, SADD and MADD chapters were initiated, and peer counseling groups were formed.

The various funding sources for the program include State and national prevention programs, as well as allocations from participating schools, foundations, private donations, and the United Way.

Early Drug Abuse Prevention

Early Drug Abuse Prevention (EDAP) is a community-based, primary prevention program consisting of 12 educational support group sessions for fifth through eighth graders, using the small group approach to create an atmosphere of intimacy and trust with group members.

Agency

Washington County Youth Service Bureau
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Montpelier, VT 05602

Contact Name

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State Director

Richard Powell II
Vermont Office of Alcohol and Drug Abuse Programs
103 South Main Street
Waterbury, VT 05676
(802) 241-2170, 241-2175

State Prevention Director

Steven M. Gold
(802) 241-2170

Clientele

High-risk youth, specifically those who may have a multiplicity of risk factors in their lives, such as being a child of an alcohol or other drug abuser, or being economically disadvantaged, sexually promiscuous, chronically failing in school, child of a divorced or single parent family, physically or mentally abused, and chronically ill or living with a chronically ill parent.

While high-risk youth are the target population, the program approach avoids any indication that small groups are for "bad," "needy," or "labeled" children. Three youth are randomly chosen and four high-risk youth are added to balance the group. This procedure gives the group a mix of high-risk and low-risk children who can support and learn from each other without being labeled. This strategic mixing allows all youth an equal, completely voluntary opportunity to participate in the program.

EDAP maintains that high-risk youth have often shown a particular need for the intensity and intimacy of the small group setting, often unavailable to them outside of EDAP. The small groups are forums that foster the discussion of trust issues and create a healthy environment for promoting a positive self-concept.

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Major Services

EDAP was developed as a proactive program to promote positive self-concepts in young people and to encourage the development of life skills that strengthen their ability to lead healthy, alcohol- and other drug-free lives. The program consists of 12 support group sessions for fifth through eighth graders in which (1) the small group approach creates an atmosphere of trust and intimacy, (2) both high-risk and low-risk youth are strategically mixed in a group without labeling anyone, (3) trained cofacilitators are from within the school and from outside community agencies, and (4) group meetings are held in schools and divided according to grade level.

The core activities and strategies of the EDAP program consist of 12 educational support sessions, each lasting 1 hour. The following 10 issues critical to alcohol and other drug use prevention for young people are addressed in a positive learning approach during the sessions:

- Self-concept
- Empowerment
- Feelings
- Clarifying values
- Problem-solving
- Decisionmaking
- Risk-taking
- Support
- Resources
- Termination

The Washington County Youth Service Bureau is currently completing a comprehensive second edition of the *EDAP Facilitator's Manual*, which outlines all aspects of the program, including orientation to EDAP, community-based strategies, group dynamics, and curriculum and worksheets. Additionally, the Washington County Youth Service Bureau periodically offers local, 2-day cofacilitation training sessions.

EDAP models healthy conditions, providing individual youth the opportunity to develop skills and perceptions enabling him or her to live in a healthy, self-directed manner. The program addresses the young person's environment by encouraging parent, teacher, and community participation in the program.

Community coordination is crucial to EDAP. The program combines the efforts and input of the Washington County Youth Service Bureau, 13 area schools, parents, community members, the Vermont Office of Alcohol and Drug Abuse Programs, the Vermont Department of Education, various community groups, and several private businesses.

EDAP is part of a larger, holistic approach by Vermont's Mandatory Drug Education Program (Act 51) to educate youth about alcohol and other drugs and is funded through the Vermont Department of Education and the Vermont Office of Drug and Alcohol Abuse Programs.

Leadership Project

This comprehensive prevention training program for young people and adults uses a team-building approach to attack the problem of alcohol and other drug abuse in a primarily rural county in southeastern Vermont and in one suburban Massachusetts community.

Agency

The Leadership Project/Project Adventure
P.O. Box 331
Westminster, VT 05158

Contact Name

James Grout
Director

Telephone

(603) 756-9030

State Director

Richard Powell II
Director
Vermont Office of Alcohol and Drug Abuse Programs
103 South Main Street
Waterbury, VT 05676
(802) 241-2170

State Prevention Coordinator

Steven M. Gold
(802) 241-2178

Clientele

Widely diverse project team members who represent a variety of adolescents from many peer clusters, including high-risk and low-risk youth. These young people are invited to join the team because they have been identified as leaders. Adult team members include the police, school personnel, mental health service providers, and parents.

Major Services

As the mainstay of the Leadership Project, the project teams become the catalysts for community coalitions. These teams

- Attend workshops and regular team meetings designed to develop communication and leadership skills, respect for differences, alcohol and other drug abuse prevention knowledge and skills, self-esteem, and group strength (Community prevention activities are also planned by the team during the workshops and team meetings.)
- Promote and sponsor informational presentations, role modeling, alternative activities, and self-esteem and ground-building activities
- Promote and sponsor Student Assistance Programs (SAPs) to help students who have already felt the impact of alcohol or other drug use (None of the school systems had a SAP before the

Leadership Project was organized; now each high school has adopted a prevention-oriented SAP and has adapted its policy to provide assistance rather than punishing those who used alcohol or other drugs.)

- Conduct dialogue nights in all communities with specific target groups, such as teens-parents, teens-teachers, and teens-police (These dialogue nights have demonstrated that many teens and adults desire more communication and that they are committed to addressing the problem of alcohol and other drug abuse.)

- Make regular presentations to elementary and middle school-aged groups, varying from formal curriculum-based presentations to discussion groups

- Support existing agencies' efforts and actively promote networking among concerned individuals and organizations

The Leadership Project has demonstrated that strong adolescent leaders can develop in all peer clusters and can involve peers in alcohol- and other drug-free activities.

The project has received extensive support from State and local prevention offices. The county's Department of Mental Health and Division of Youth Services have obtained increased funding to respond to the increase in the number of youth seeking help for alcohol and other drug problems

The Leadership Project was developed as a pilot program of the sponsoring agency in 1987 and funded by the Office for Substance Abuse Prevention at four pilot sites in New England. Project Adventure's programs have been adopted by more than 1,000 organizations.

The Leadership Project's design for dissemination is a training of trainers model, with community control of the various program components. The communities that adopt the program will conduct a needs assessment and will be assisted by the Leadership Project's staff members.

Families And Schools Together

This unique program in Madison, WI, includes schools, mental health agencies, alcohol and other drug agencies, and hard-to-reach families as collaborative partners in an effort to empower families to become the primary prevention agents for their own children.

Lead Agency

Family Service
128 E. Olin Avenue
Madison, WI 53713

Contact Names

Lynn McDonald, Ph.D., ACSW
Program Director

Nic Dibble
Project Manager

Telephone

(608) 251-7611

State Director

Larry W. Monson, ACSW
Wisconsin Office of Alcohol and Other Drug Abuse
1 West Wilson St.
P.O. Box 7851
Madison, WI 53707
(608) 266-3442

State Prevention Coordinator

Louis Oppor
(608) 266-9485

Clientele

Children who are at high risk for alcohol and other drug problems and who are members of hard-to-reach families, half of whom are from minority groups. A profile of a typical participant includes the following characteristics: male, average age of 8 years and 3 months, 1 or more years behind in school, behavioral problems in the classroom, limited attention span, inconsistent work performance, apathy, hypersensitivity, depression, high stress, and family trauma.

Children and their families participate in an 8-week program of weekly multifamily meetings followed by a 2-year phase of monthly meetings for graduate families. Once a program is fully operational in an elementary school, approximately 40 families can be served in the preliminary 8-week phase.

Major Services

The Families and Schools Together (F.A.S.T.) program's mission is to educate children about their rights to have an alcohol- and other drug-free life. It simultaneously provides parents the opportunities to deal with their own dependence and codependence issues, so that they may

ultimately become the primary prevention agents for their children. The activities are based on family systems theory, stress and social support research, and child psychiatry techniques.

- A comprehensive F.A.S.T. program curriculum was developed with the goal of reducing the likelihood that participating children will become alcohol and other drug abusers in adolescence. The curriculum incorporates the following elements:
  - At the first meeting, families construct a flag as a unique symbol of family unity.
  - Each session begins with a meal that is eaten as a family unit, with families at separate tables.
  - A structured family communication exercise contributes to a strong self-image as members take turns listening to each other.
  - Families participate in a "feelings identification" exercise, which helps them learn about each other's feelings, as well as their own.
  - Parents participate in a parent support meeting that teaches them to modify their children's behavior through behavior contracting.
  - Parents and children spend one-to-one quality time, which builds self-esteem for both participants.
  - A lottery is held with one family winning as a family unit.
  - A closing activity, designed to provide positive and fun alternatives to using alcohol and other drugs, reinforces family ties.
- The *F.A.S.T. Training Manual* was developed to address all areas necessary for replication of the program when used in conjunction with the training model. It contains strategies for dealing with each component of the curriculum, as well as an appendix that includes all record-keeping instruments.
- Community coordination is essential to the success of the F.A.S.T. program. The following elements illustrate its collaborative nature:
  - Schools identify the high-risk students and make initial contact with parents.
  - Mental health agency staff provide overall coordination and handle linkages to community resources.
  - An alcohol and other drug specialist conducts related program activities and provides assessments of parents who may be abusing alcohol or other drugs.
  - Parent staff recruit families and encourage them to remain in the program.
- A newsletter, which is written and prepared primarily by parent graduates, is circulated locally to families and community agencies.

The F.A.S.T. program is currently listed in Wisconsin Act 122, the State's Antidrug Bill; $1 million is appropriated for its replication in communities throughout the State.

"Honorable Mention" Programs

Comprehensive Alcohol Drug Rehabilitation and Education

Agency

San Francisco Department of Public Health
1380 Howard Street, Fourth Floor
San Francisco, CA 94103
(415) 255-3500

Contact Name

James Loyce

The Comprehensive Alcohol Drug Rehabilitation and Education (CADRE) program provides a coordinated multicultural system of prevention, intervention, treatment, and rehabilitation services for children, youth, and families who are at high risk for alcohol and other drug abuse. CADRE also provides these services to people presently abusing these substances.

Family Communication Skills Program

Agency

Project INFO, Inc.
9401 South Painter Avenue
Whittier, CA 90605
(213) 698-9436

Contact Name

Irene Redondo-Churchward

The Project INFO, Inc., Family Communication Skills Program offers a prevention and early intervention educational program that brings together parents and their families to learn how to enhance communication skills as a tool for resolving their difficulties and preventing alcohol- and other drug-related problems.

Children of Substance Abuse Program

Agency

Operation PAR, Inc.
10901-C Roosevelt Boulevard
Suite 1000
St. Petersburg, FL 33716
(813) 570-5080

Contact Name

Shirley D. Coletti

Operation PAR implements a community-coordinated program targeting high-risk infants and preschool children of alcohol- and other drug-abusing women by providing early identification, intervention, referral, and followup services to pregnant and post partum women who abuse alcohol and other drugs, and to their children.

Feelings of Children Under Stress Program, City of Cleveland

Agency

Cuyahoga County Drug Abuse Services Board, Inc., and City of
Cleveland Office of Mental Health and Substance Abuse
Glenville Recreation Center
680 East 113th Street
Cleveland, OH 44108
(216) 451-7820

Contact Name

Sally L. Totenbier

The Feelings of Children Under Stress (F.O.C.U.S.) program seeks to prevent the onset of alcohol and other drug use in high-risk minority children through an intensive 3-month program that emphasizes (1) discussion, activity, and expressive arts groups to educate children about the consequences of alcohol and other drug use; and (2) positive peer interactions and socialization skills that support normal, healthy growth and development.

Teen Outreach Program

Agency

Family Planning Services of Cumberland and Gloucester Counties
6 South Laurel Street
Bridgetown, NJ 08302
(609) 451-3339

Contact Name

Tim Fornes

The Teen Outreach Program recruits and trains peer educators from a high-risk target population of adolescents, who then provide information and education about alcohol and other drug abuse through formal education presentations, teen life theatre, and informal rap sessions to teens, parents, and community members.

Archdiocese Drug Abuse Prevention Program

Agency

Archdiocese Drug Abuse Prevention Program
1725 Castle Hill Avenue
Bronx, NY 10462
(212) 904-1333

Contact Name

Sally Ann Shields

The Archdiocese Drug Abuse Prevention Program, using the Mutual Aid Model, is a school-based program that provides prevention/intervention services, including faculty and parent workshops; individual, group, and family counseling; psychoeducational testing; classroom education; discussion groups; crisis intervention; school consultation; and referrals.

Statewide Enforcement, Education, Prevention System

Agency

Office of the Attorney General of Mississippi
P.O. Box 22947
Jackson, MS 39225
(601) 354-6351

Contact Name

Betty Daugherty

Statewide Enforcement, Education, Prevention System (SWEEPS) is a communication system that assists counties in coordinating alcohol and other drug abuse prevention efforts and establishing a unified, collaborative network to develop a comprehensive approach and a delivery system for statewide public awareness, primary prevention and intervention, and law enforcement.